

Community Application for Opioid Settlement Funding

Application due date	November 30th, 2023
Anticipated notice of award	January 15th, 2024
Anticipated funding period	February 1st, 2024 - January 31st, 2025
Submission date	

Organizational Information

Organization name		
Purpose of organization		
Type of organization (501c3, for profit, governmental)		
Federal tax ID number		
Is your organization certified, licensed, or accredited by the state of TN? If yes, provide documentation.	Yes	No
Amount of funding currently being received from Lewis County and purpose		
Street address		

Email address	
Phone number	
Name of project director	
Title of project director	
Name of project contact	
Title of project contact	

Project Information

Project title:

Project description:

Project objectives:

Project activities:

Project partners or collaborators:			
Expected outcomes and how success with	ill be measured:		
Project timeline:			
New or existing project? (Check one)		New	Existing
		.1	
If existing, have/will you receive grant	funding from any	other source for	this project?
	Yes	No	
	105	INO	
If yes, amount:			
If existing, how will these funds be used	d to supplement ra	ther than suppla	nt the project?
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Will you charge a fee or bill insurances for	or the services provided with this project?	
	YesNo	
If yes, please describe and provide estimation	ated amounts.	
If yes, please describe and provide estimate	acci amounts.	
Is the project evidence-based or based on	Is the project evidence-based or based on promising practices? (Provide links to supporting evidence)	
Ye	esNo	
Link(s):		
Data to support the need for the project:		
Strategies that will be addressed with	Primary Prevention	
funds: Select all that apply	Harm Reduction	
	Treatment	
	Recovery Support	
.	Education & Training	
	Research & Evaluation	
Target population and geographical area		
Anticipated number of people served with awarded funds		

What percentage of funds awarded will be used to serve residents of Lewis County?	
How will this project meet the Board's	main objective of saving lives?

Funding Information (Must also submit a Budget Template)

Total funding request	\$
Budget narrative:	
How will this project be sustained after	er the funding period?

Checklist of Required Documents:

- _____ Application for funding
- _____ Completed budget and budget narrative (template provided)
- _____ Work plan (template provided)
- _____ Current annual operating budget
- _____ State certification, licensure, or accreditation if applicable
- _____ Letters of support from any project partners or collaborators